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BOOK REVIEWS

Modern Topics in Gastrointestinal Endoscopy

Eds K F R Schiller and P R Salmon. (Pp 342; £11·50.) William Heinemann Medical Books. 1976

Without doubt the most important advance in gastroenterological investigation since the invention of the barium meal has been the development of fibreoptic endoscopy. The principle of these instruments was devised by Professor H H Hopkins in 1954. The prototype instruments were developed by Dr Basil, but, like so many brilliant discoveries in Britain, the subsequent production has depended on American and Japanese technology.

Advances in this field in the past few years have been amazing. From above downwards they include safer dilatation of oesophageal strictures, early recognition of gastric cancer, the possibility of repeated biopsy of suspicious lesions in the upper gastrointestinal tract, emergency diagnosis in acute haemorrhage, studies of postoperative gastric pathology, the elucidation of doubtful duodenal lesions, endoscopic cannulation of the biliary and pancreatic tree, transduodenal removal of stones from the common bile duct, study of the upper small intestine, effective laparoscopy, and a whole new field in the study and therapy of colonic polyps.

This important new publication presents a current appraisal of gastrointestinal endoscopy, mainly of a clinical nature. The editors have gathered a group of experts from the United Kingdom, Germany, and the USA-gastroenterologists, surgeons, pathologists, and radiologists, as well as Professor Hopkins himself—who have produced a series of highly readable and informative essays on modern fibre-endoscopy. The place of these instruments in diagnosis and therapy of gastrointestinal problems, the care of the patient, the hazards, the role of the radiologist and pathologist alongside the endoscopist all receive extensive cover and the final chapters deal with the future of endoscopy and the possibilities of research. This last contribution is by that pioneer of endoscopy, Sidney Truelove, to whom the book is dedicated. This volume is a "must" for surgeons and physicians with an interest in clinical gastroenterology, which today must inevitably include fibreoptic endoscopy.

HAROLD ELLIS

Rational Diagnosis and Treatment

Henrik R Wulff. (Pp 182; £3.75.) Blackwell Scientific. 1976.

During the last few decades enormous quantities of time, talent, and money have been spent in the search for improvements in treatment—new and more effective drugs, alternative forms of surgery, and so on. Yet, as Dr Wulff cogently points out, rela-

tively little attention has been paid in the way in which doctors make diagnoses and clinical decisions, and it surely cannot be rational to ignore the prospect of improving the effectiveness of therapy by trying to improve the way doctors use it.

This prospect, which Dr Wulff refers to as "rational" diagnosis and treatment, is what the book is all about. From the thoughtful foreword contributed by Dr John Lennard-Jones (actually one of the best parts of the book) through such topics as "medical data in a technological age," "the new mathematics in medicine," and "diagnosis and the laws of chance," Dr Wulff attempts to set out in non-mathematical language an approach to clinical decision-making which owes more to rational thinking than to dogma or guesswork.

Of course it is easy to disagree with at least some of what Dr Wulff says as he wanders through the field of clinical decision-making like some nosological Illich. Nevertheless, I suspect the book was not written in order to provide sage nods of agreement, and certainly it is not aimed at the computing, mathematical, or statistical fraternity. Apart from occasional recourse to mathematical symbols, and an appendix on statistical methods which seems rather irrelevant, the book is aimed at those clinicians for whom "rational" decisions are worth taking trouble to attain. It is probably the simplest book yet to be written on this topic, it is both timely and interesting, it is provocative rather than placatory, and in some places it is downright annoying. For this last reason, if for no other, it deserves to be widely read.

F T DE DOMBAL

Progress in Cardiology

Paul N Yu and John F Goodwin. (Pp 224; £8·25.) Henry Kimpton. 1976.

This is the fourth volume in a series which since its first appearance in 1972 has earned a high reputation for presenting critical reviews of current knowledge in a wide range of subjects in the field of both clinical and laboratory cardiology. As with previous volumes each chapter has been written by an acknowledged authority in his own particular specialty, and by skilful selection of subjects the editors, one from each side of the Atlantic, have almost completely avoided repetition not only in this volume but in the series as a whole.

The first chapter, lucidly written and beautifully illustrated by Ernest Craige, emphasises how combined echo- and phonocardiography have settled many long-standing controversies over the genesis of heart sounds and murmurs. This should be compulsory reading for students of auscultation of the heart. The importance of the increasing value of echocardiography as a clinical tool is again demonstrated in the second chapter, an excellent account of the click and late systolic murmur syndrome and its now well established relationship to mitral valve prolapse. The

chapter on digitalis toxicity includes a detailed account of the electrophysiological mechanisms involved, which readers not well versed in this field may find rather heavy going. It also gives a useful critique of the value of serum digitalis levels in the diagnosis of toxicity. A comprehensive review of the development of the technique of quantitative left ventriculography and its application to various disease states should prove of interest to those working in the cardiac catheterisation laboratory.

In the field of coronary artery disease there is a 34-page account of the diagnostic and prognostic value of serum enzyme changes and a chapter devoted to the prevention of heart cell death. A thought-provoking chapter on coronary artery disease in childhood reminds us that in addition to the various congenital anomalies atheroma and acquired coronary artery disease have their roots in childhood. The illustrations here are of high quality, but the literary style is a little ponderous. Chapters on high altitude pulmonary oedema and on lysosomes of the cardiovascular system complete the wide range of topics covered. All cardiologists should find something of interest here.

R G GOLD

Man, Environment and Disease in Britain

G Melvyn Howe. (Pp 301; £1.25.) Penguin Books. 1976.

Medical geography is as old as the first indications of a scientific basis to health and disease. This is acknowledged on the fly-leaf by a translation from Hippocrates's treatise, On Airs, Waters, and Places. But this book is no mere updated version of an old theme. It is an absorbing account of the environmental and socioeconomic influences on the patterns of disease in Britain from prehistoric times to the present day.

Our early ancestors were migrants from Europe, and we still have certain characteristics such as stature and blood groups attributable to the patterns of distribution of ancestral populations. Throughout the book the historical time scale is made easy by the use of broad period names such as medieval times, early industrial times, and the like. In each period the main contemporary diseases are described and the interplay between genetic, environ-mental, and nutritional factors in their causation discussed. Communicable diseases posed by far the greatest problems in the past, and there are scholarly accounts of plague, typhus, smallpox, and other epidemic diseases. The author has delved deeply into the history of epidemics in Britain, and the excellent bibliography at the back of the book is a gift to the researcher in medical history.

When it comes to industrial times the influences of economic conditions and social trends become more evident, and there is an enlightening account of the population increase and redistribution from the eighteenth